

EXHIBIT 1



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Compound Management



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Agenda

- The Growing Concern Over Compounds
- Express Scripts Solutions Evolution
- A More Robust Solution Will Give Your Clients More Control
- A Robust Communication Plan Targets Compound Users
- Next Steps



Claims Submission Standards Create a Loop Hole for Bulk Manufacturers and Compounding Pharmacies

COMPOUND CLAIMS

PROCESS

2012

(1/1/12 and beyond)



2011

(through 12/31/11)



NCPDP 5.1



NCPDP D.O.

- Only **most expensive ingredient** submitted
- Coverage based on **only** most expensive ingredient
- 'Blind' summation of all ingredients submitted and paid
- All **ingredients** submitted
- Coverage based on **all** ingredients
- Each ingredient cost must be submitted for reimbursement
- Expanded reject oversight

Increasing Transparency Created a Disturbing Trend



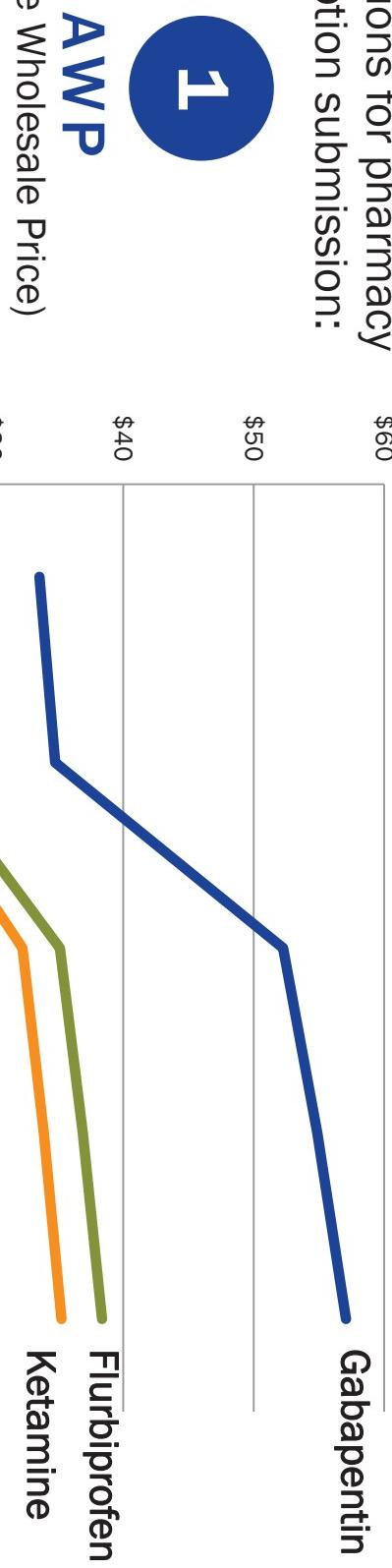
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Compound Ingredient Price Increases

Two options for pharmacy prescription submission:



(Usual and Customary)

U&C

\$30
\$20
\$10

(Usual and Customary)

AWP
(Average Wholesale Price)

\$30
\$20
\$10

Since 2011, bulk powder manufacturers have
RAISED AWP PRICES DRASTICALLY



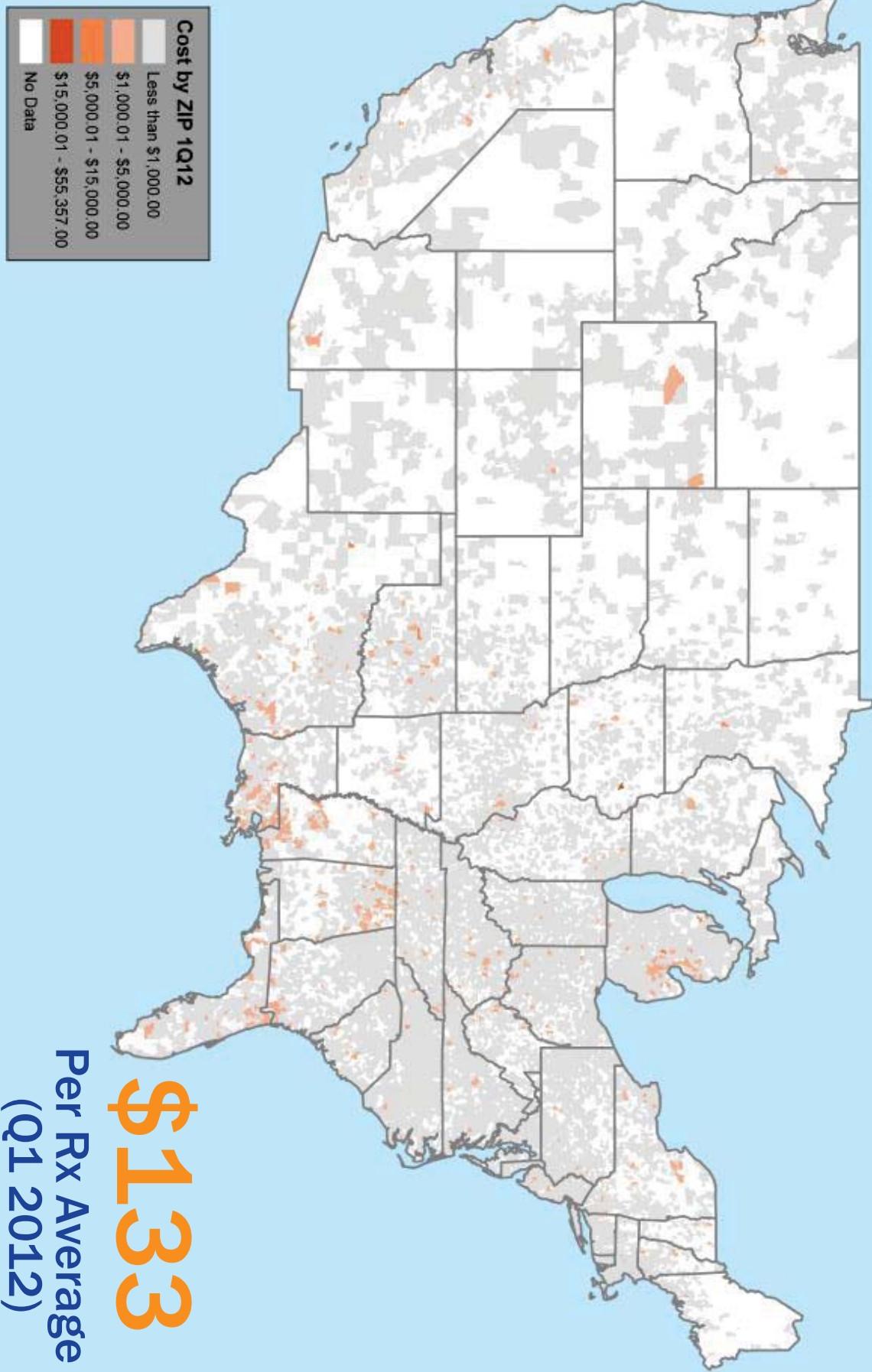
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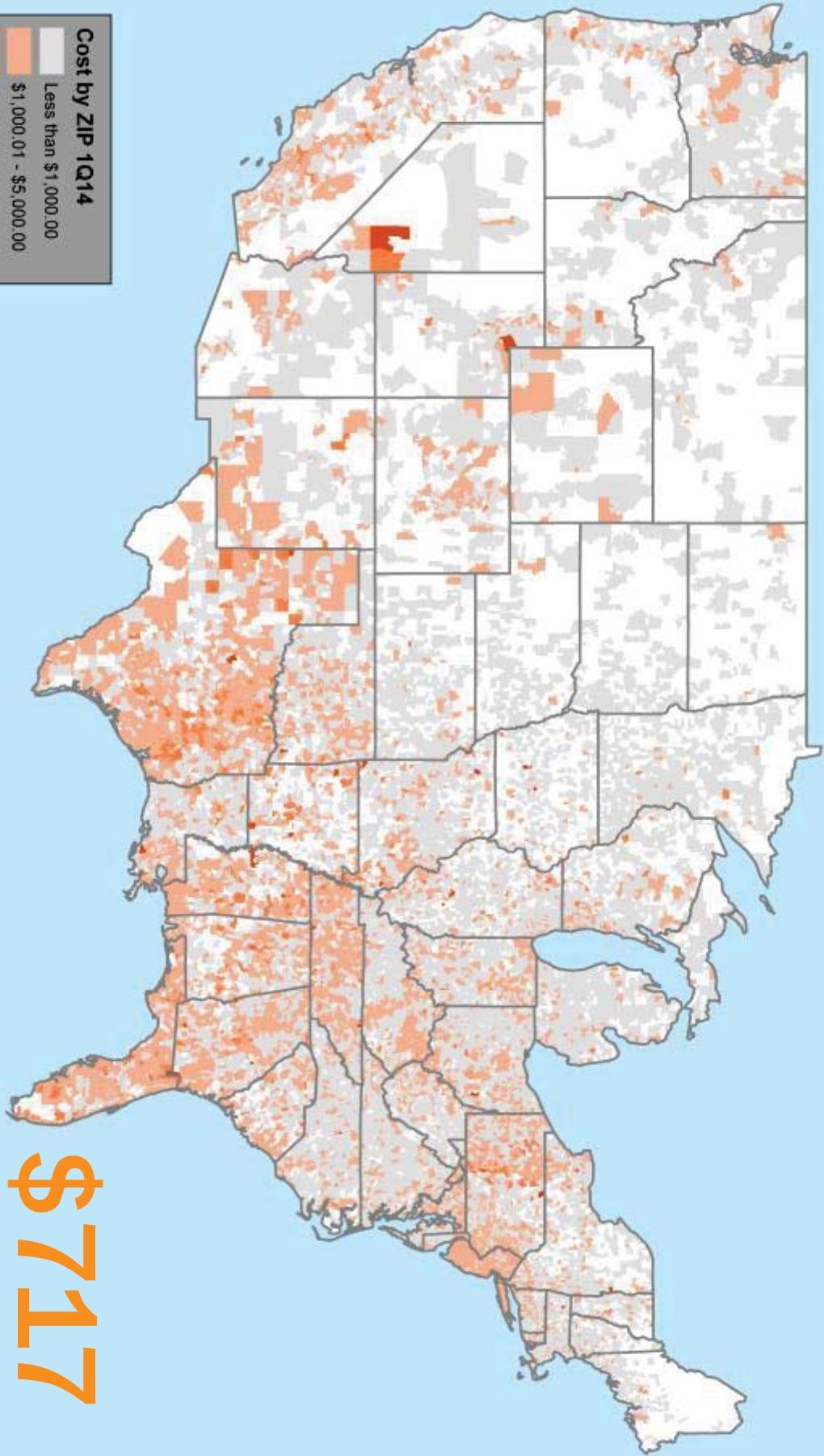
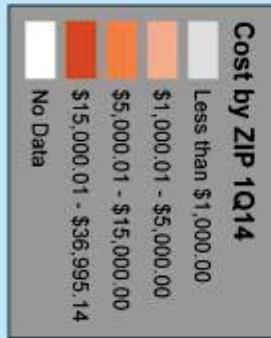


\$133
Per Rx Average
(Q1 2012)





\$717
Per Rx Average
(Q1 2014)



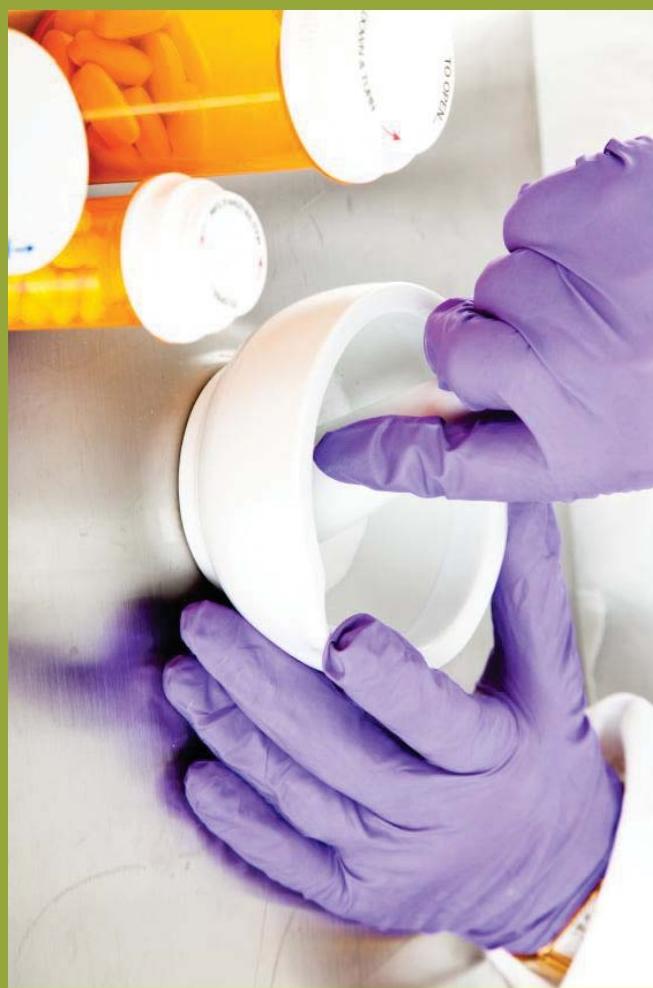
218%

year over year

spend increase

on compounded

medications



Source: 2013 Express Scripts Drug Trend Report

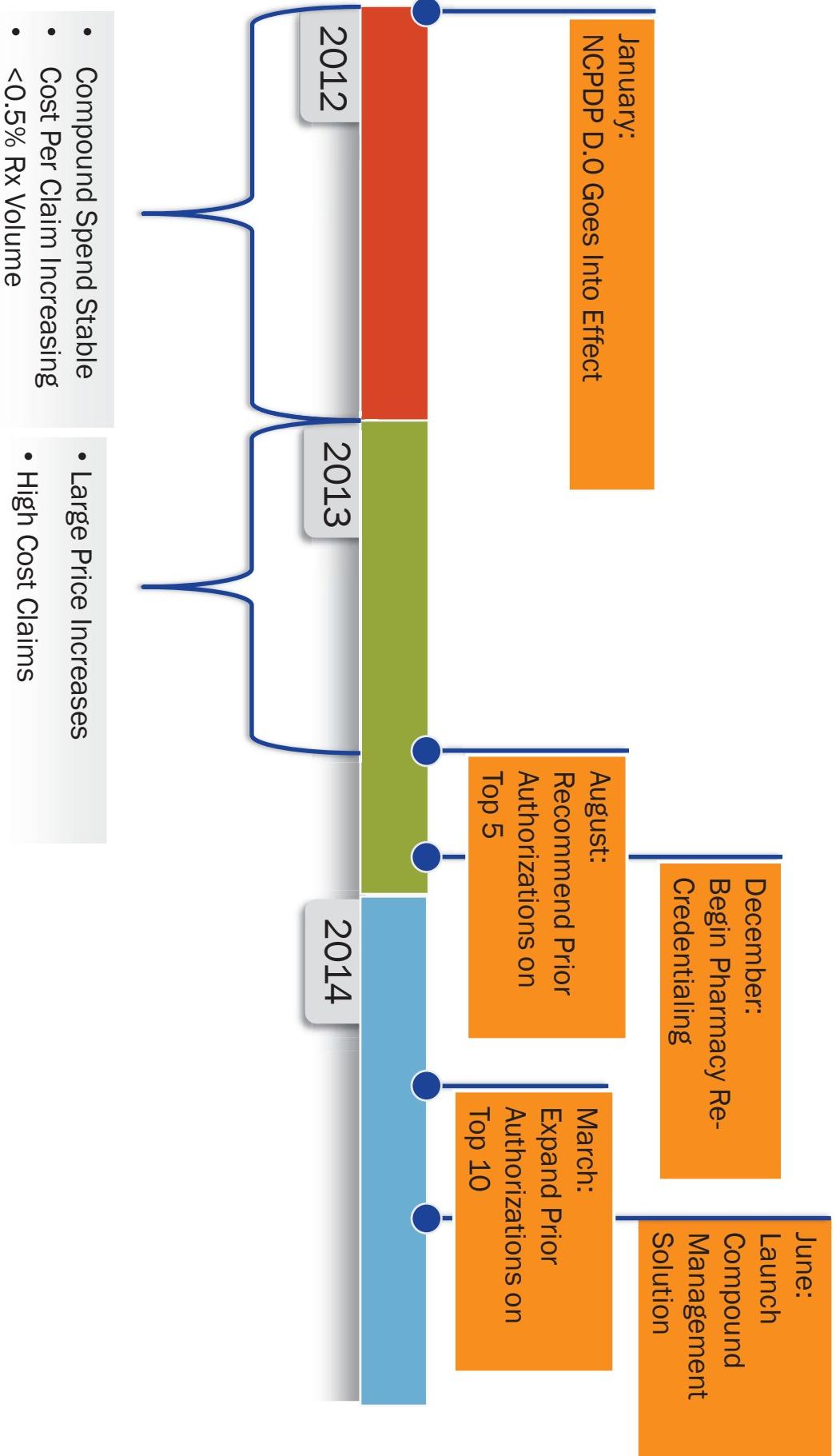


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Express Scripts Solutions Evolution



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Compound Solution Comparison

Compound PA vs. Compound Management

	Current Compound Prior Authorization	New Compound Management
Bulk Powders Targeted	10	1,000+
Compound Ingredients Targeted	Prior ingredient	All ingredients
Mechanism		Rx “Not Covered” reject
Program Fee	\$0.03 PMPM (Fee to be eliminated)	No Charge

Compound PA Successfully Implemented for 200 Clients with No Member Noise



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New and More Robust Compound Management Solution

- Evaluates ALL Ingredients
 - Bulk Powders
 - Bases (Creams, Ointments)
 - Tablets, Capsules
 - Vitamins & Minerals
- Targets Over 1,000 Ingredients
- Ongoing Updates
- Prenotification
- Client Opt-Out
 - No Charge
 - No Penalty

» Eliminates 95%
Compound Spend



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Compound Management Ingredient Selection Criteria

- 1
- 2
- 3
- 4
- 5

Represents a significant cost and/or within the top 200 most expensive

Traditionally considered OTC under a client benefit

Has commercially available alternative medications

Products that have a significant and/or continuous price increases

Products lacking clinical evidence within compounds

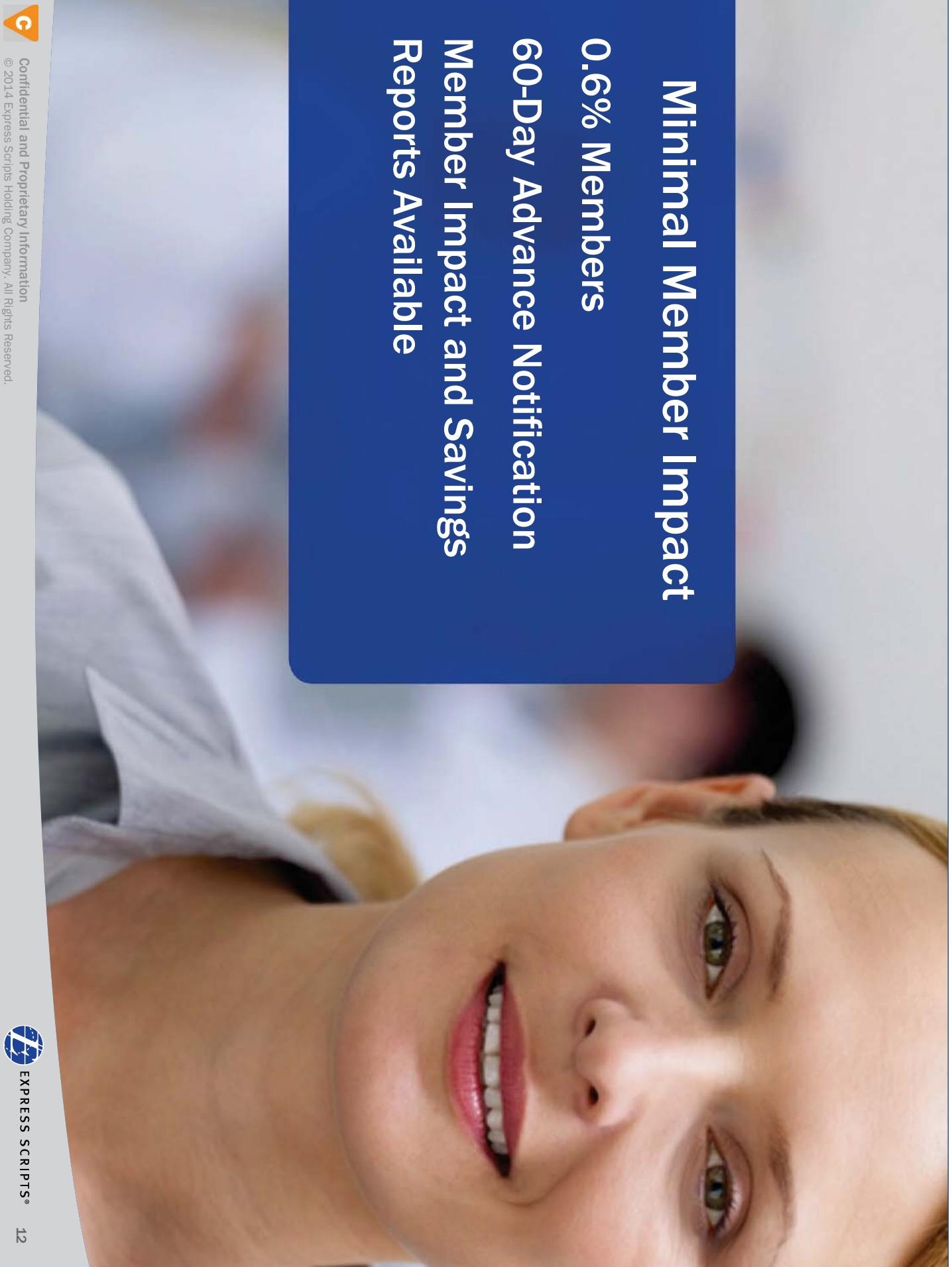


Minimal Member Impact

0.6% Members

60-Day Advance Notification

Member Impact and Savings
Reports Available



How the Compound Management Solution Works Inclusion/Exclusion

Scenario 1

Freedom Cepapro (Primary)

Tranilast

Fluticasone powder

REJECT

Scenario 2

Oseeltamivir (Primary)

Ora-Plus

Ora-Sweet (OTC)

Ora-Sweet is an inexpensive OTC
and on the inclusion list*

NO REJECT

Component Evaluation is a Game-Changer

*This OTC would only be covered as part of a compound and does not affect the plan's setup.

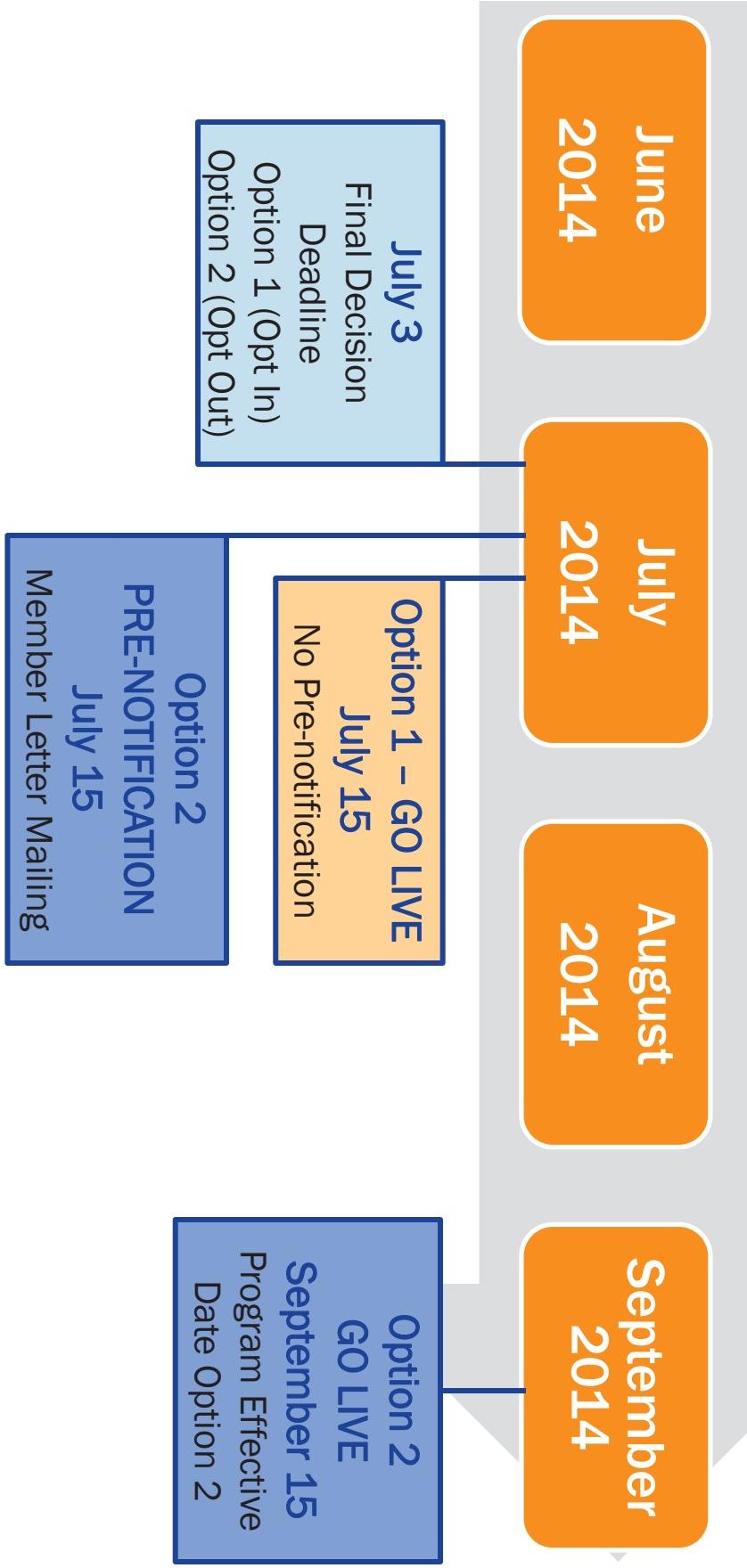


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New Compound Management Solution Implementation Timeline



Option 1 = Without Member Prenotification Letters

Option 2 = With Member Prenotification Letters 60 Day Notice

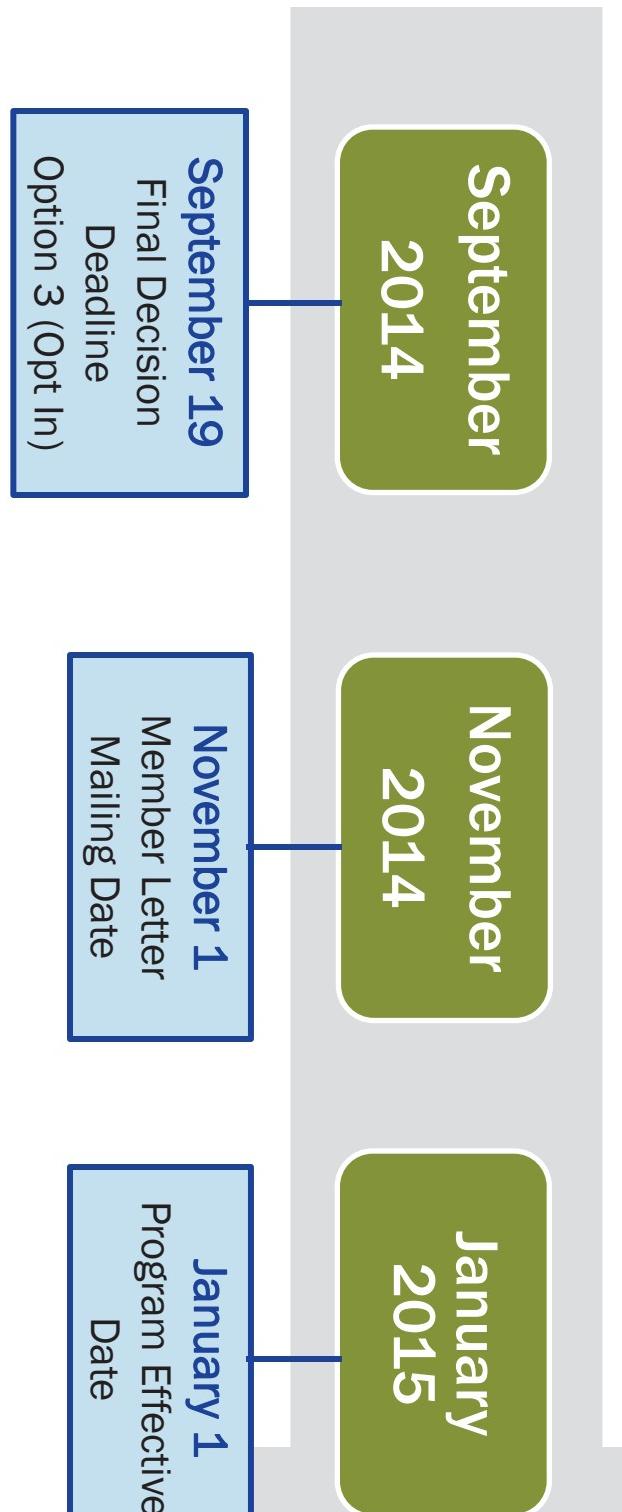


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Option 3: Alternate Implementation Timeline



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Prenotification Member Letter

60-day member notice

Letter calls out needed change to member with:

1. Specific medication
2. Rationale for change
3. Call-to-action

<Client Logo>

<Client Logo or Express Scripts Logo>

<><First Name>><><Last Name>>
<><Address, line 1>>
<><Address, line 2>>
<><City>>, <><State>> <><Zip>>
<><Month Year>>
<><Key Code>>

Dear <><First Name>>,

We want you to know about an important change coming to your prescription drug coverage on <><Effective Date>>. As of this date, your prescription benefit will no longer cover prescriptions for compounded medications containing the following:

<><Drug name>>
<><Drug name>>
<><Drug name>>

Why your coverage is changing
The U.S. Food and Drug Administration (FDA) defines a compound medication as one that requires a licensed pharmacist to combine, mix or alter the ingredients of a medication when filling a prescription. The FDA does not verify the quality, safety and/or effectiveness of compound medications.

To avoid paying the full cost of your medication, you should:

- Ask your doctor for a new prescription for an FDA-approved drug before your next fill.
- Be aware that this new prescription may still require further review and/or approval to be covered under your plan.

Please understand that because the medication you're currently taking will no longer be covered under your plan, you could pay the full cost if you continue taking it. So, it's important that you ask your doctor for a new prescription before <><Effective Date>>. For any questions, please call the number on your member ID card.

Sincerely,

Andrew R. Belin

<signature id 2>

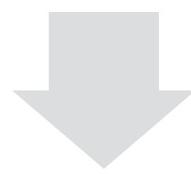
Andrew R. Belin, Doctor of Pharmacy
Vice President of Pharmacy Services
Express Scripts

Benefit coverage change notice.
Please talk with your doctor
about your prescription.

Client and Consultant Homework

Medical Benefit

- Pull Patient Data
- Watch Ongoing Compound Spend



Compound Reimbursement Flanking

- Compounding Pharmacies May Attempt To Submit Under Medical
- Physicians May Attempt To Submit Under Medical

» Expect the Unexpected From Compounding Pharmacies



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Next Steps

- Clients will receive a communication on June 5
 - Account teams are prepared to provide additional details
 - Option 1: Opt Out by July 3
 - Option 2: Opt In by July 3
 - Option 3: 1/1 Implementation Opt Out by September 19
- Benefit Advisors will receive a copy of the client communication following this webcast
- Contact your Strategic Relations Director with any additional questions not addressed on the webcast



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Thank you



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